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**PATENT APPLICATION FEE DETERMINATION RECORD**

Substitute for Form PTO-875

Application or Booklet Number

10-535,256

APPLICATION AS FILED - PART I

(Column 1)

(Column 2)

## SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
<b>BASIC FEE</b> (37 CFR 1.16(a), (b), or (c))		
<b>SEARCH FEE</b> (37 CFR 1.16(k), (l), or (m))		
<b>EXAMINATION FEE</b> (37 CFR 1.16(o), (p), or (q))		
<b>TOTAL CLAIMS</b> (37 CFR 1.16(i))	minus 20 *	*
<b>INDEPENDENT CLAIMS</b> (37 CFR 1.16(h))	minus 3 *	*
<b>APPLICATION SIZE FEE</b> (37 CFR 1.16(u))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
<b>MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))</b>		

RATE (\$)		FEE (\$)
X	=	
X	=	
TOTAL		

SMALL ENTITY	
RATE (\$)	FEE (\$)
X	
X	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

APPLICATION AS AMENDED - PART II

7.26.05

(Column 1)

(Column 2)

(Coluna 3)

SMALL ENTITY

Of

OTHER THAN  
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
	Total (37 CFR § 16.11)	20	Minus	20		=
	Independent (37 CFR § 16.14)	1	Minus	3		=
Application Size Fee (37 CFR § 16.51)						
FIRST PRESENTATION OF MULTIPLE INDEPENDENT CLAIMS (37 CFR § 16.11)						

RATE (\$)	ADDITIONAL FEE (\$)
1. =	
2. =	
TOTAL ADDITIONAL FEE	

SMALL ENTITY		
	RATE (\$)	ADDITIONAL FEE (\$)
CR	✓ =	
CR	✓ =	
CR		
CR	TOTAL	
	ADDITIONAL FEE	

AMENDMENT B	(Column 1)		(Column 2)		(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT ENTER
Total (37 CFR 1.16)	*	minus	**		+
Independent (37 CFR 1.16(b))	*	minus	***		+
Application Size Fee (37 CFR 1.16(b))					
FIRST PRESENTATION OF MULTIPLE INDEPENDENT CLAIMS					

RATE (\$)		ADDITIONAL FEE (\$)
1	2	
1	2	
TOTAL AMOUNT DUE		

	RATE (\$)	ADDITIONAL FEE (\$)
OP	1	
OP	1	
OP		
OP		
OP	TOTAL RENT FEE	

\* If the entry in column 1 is less than the entry in column 2, write 0 in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20.

\* If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter:

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate two adjacent columns of information immediately preceding this column.

[illegible]

If you need assistance in completing this form, call 1-800-368-5868.